## **INVOICE**

				Invoice #				
חיוו ידי				Invoice Date				
Bill To	O							
Project Name								
Project Site				Address:				
Project I								
Date of V								
Payment Terms				•				
Expiration Date				TEL :				
				FAX	:			
Grand Total				Mail : NAME :				
				NAM	lE :			
		(Tax(10%)	)					
							ļ	
NO		Description		Qty	Unite Pri	ice	Total	
				~-/				
				Subto	ntal			
				Tax(10%)				
				Total				
Terms as	nd Cond	tions:						
	TD.							
Payment	t Terms:							
First Bar	nk Accou	nt						
Bank Detail		Bank Name		Branch Nar	ne			
	etails	Account Title		Account Number				
		Account Name						
Second I	Bank Acc	ount						
		Bank Name		Branch Nar	ne			
Bank D	etails	Account Title		Account Num	ber			
		Account Name		•	<u> </u>			